


(Official Form 1) (12/03) West Group, Rochester, NY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-----------------------------|------------------------------|-------------------------------|-----------------------------|------------------------------|-------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>FORM B1</b><br><b>United States Bankruptcy Court</b><br><b>NORTHERN District of ILLINOIS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     | <b>Voluntary Petition</b>                                                                                                                                                                                                                                                                                                                                                           |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Name of Debtor</b> (if individual, enter Last, First, Middle):<br><b>Johnson-McGee, Brenda J.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     | <b>Name of Joint Debtor</b> (Spouse)(Last, First, Middle):                                                                                                                                                                                                                                                                                                                          |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>All Other Names used by the Debtor in the last 6 years</b><br>(include married, maiden, and trade names):<br><b>NONE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                     | <b>All Other Names used by the Joint Debtor in the last 6 years</b><br>(include married, maiden, and trade names):                                                                                                                                                                                                                                                                  |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No.</b><br>(if more than one, state all): <b>2115</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | <b>Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No.</b><br>(if more than one, state all):                                                                                                                                                                                                                                                                       |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Street Address of Debtor</b> (No. & Street, City, State & Zip Code):<br><b>535 Bellwood Ave.</b><br><b>Bellwood IL 60104</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     | <b>Street Address of Joint Debtor</b> (No. & Street, City, State & Zip Code):                                                                                                                                                                                                                                                                                                       |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>County of Residence or of the Principal Place of Business:</b> <b>Cook</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     | <b>County of Residence or of the Principal Place of Business:</b>                                                                                                                                                                                                                                                                                                                   |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Mailing Address of Debtor</b> (if different from street address):<br><b>SAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     | <b>Mailing Address of Joint Debtor</b> (if different from street address):                                                                                                                                                                                                                                                                                                          |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Location of Principal Assets of Business Debtor</b><br>(If different from street address above): <b>NOT APPLICABLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Information Regarding the Debtor (Check the Applicable Boxes)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Venue</b> (Check any applicable box)<br><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.<br><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Type of Debtor</b> (Check all boxes that apply)<br><input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad<br><input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     | <b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)<br><input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input checked="" type="checkbox"/> Chapter 13<br><input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12<br><input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding       |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Nature of Debts</b> (Check one box)<br><input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | <b>Filing Fee</b> (Check one box)<br><input checked="" type="checkbox"/> Full Filing Fee attached<br><input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only)<br>Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3. |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Chapter 11 Small Business</b> (Check all boxes that apply)<br><input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101<br><input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Statistical/Administrative Information</b> (Estimates only)<br><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                             |                              |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 20%;">Estimated Number of Creditors</td> <td style="width: 10%;">1-15</td> <td style="width: 10%;">16-49</td> <td style="width: 10%;">50-99</td> <td style="width: 10%;">100-199</td> <td style="width: 10%;">200-999</td> <td style="width: 10%;">1000-over</td> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>                                                                                                                                                                                                                                                                                                                            |                                     |                                                                                                                                                                                                                                                                                                                                                                                     | Estimated Number of Creditors       | 1-15                     | 16-49                       | 50-99                        | 100-199                       | 200-999                     | 1000-over                    |                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |                          |                          |                          |                          |
| Estimated Number of Creditors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1-15                                | 16-49                                                                                                                                                                                                                                                                                                                                                                               | 50-99                               | 100-199                  | 200-999                     | 1000-over                    |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/>     |                               |                             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">Estimated Assets</td> <td style="width: 15%;">\$0 to \$50,000</td> <td style="width: 15%;">\$50,001 to \$100,000</td> <td style="width: 15%;">\$100,001 to \$500,000</td> <td style="width: 15%;">\$500,001 to \$1 million</td> <td style="width: 15%;">\$1,000,001 to \$10 million</td> <td style="width: 15%;">\$10,000,001 to \$50 million</td> <td style="width: 15%;">\$50,000,001 to \$100 million</td> <td style="width: 10%;">M \$100 million</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> |                                     |                                                                                                                                                                                                                                                                                                                                                                                     | Estimated Assets                    | \$0 to \$50,000          | \$50,001 to \$100,000       | \$100,001 to \$500,000       | \$500,001 to \$1 million      | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | M \$100 million                     |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Estimated Assets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0 to \$50,000                     | \$50,001 to \$100,000                                                                                                                                                                                                                                                                                                                                                               | \$100,001 to \$500,000              | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | M \$100 million             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/>     | <input type="checkbox"/>      | <input type="checkbox"/>    |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">Estimated Debts</td> <td style="width: 15%;">\$0 to \$50,000</td> <td style="width: 15%;">\$50,001 to \$100,000</td> <td style="width: 15%;">\$100,001 to \$500,000</td> <td style="width: 15%;">\$500,001 to \$1 million</td> <td style="width: 15%;">\$1,000,001 to \$10 million</td> <td style="width: 15%;">\$10,000,001 to \$50 million</td> <td style="width: 15%;">\$50,000,001 to \$100 million</td> <td style="width: 10%;">M \$100 million</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>  |                                     |                                                                                                                                                                                                                                                                                                                                                                                     | Estimated Debts                     | \$0 to \$50,000          | \$50,001 to \$100,000       | \$100,001 to \$500,000       | \$500,001 to \$1 million      | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | M \$100 million                     |                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Estimated Debts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$0 to \$50,000                     | \$50,001 to \$100,000                                                                                                                                                                                                                                                                                                                                                               | \$100,001 to \$500,000              | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | M \$100 million             |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/>     | <input type="checkbox"/>      | <input type="checkbox"/>    |                              |                               |                                     |                          |                          |                          |                                     |                          |                          |                          |                          |                          |

**U.S. Bankruptcy Court**  
**Northern District of Illinois**  
**Filed: 05/27/2004**  
**Time: 15:58:25**  
**Debtor: BRENDA J JOHNSON-MCGEE**  
**Case: 04-20688 Fee: 194**  
**Chapter: 13 Rec. #: 3083150**  
**Judge: Jack Schmatterer**  
**341 mtg: 07/08/2004 @ 03:00PM**  
**ConfHrg: 07/21/2004 @ 12:30PM**  
**Trustee: TOM VAUGHN**

  
**1:048K20688-BK001**

(Official Form 1) (12/03) West Group, Rochester, NY

|                                                                                                                                     |               |                                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------|--|
| <b>Voluntary Petition</b><br><i>(This page must be completed and filed in every case)</i>                                           |               | <b>FORM B1, Page 2</b>                                      |  |
| <b>Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)</b>                                  |               | <b>Name of Debtor(s):</b><br><u>Brenda J. Johnson-McGee</u> |  |
| Location Where Filed:<br><u>NONE</u>                                                                                                | Case Number:  | Date Filed:                                                 |  |
| <b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)</b> |               | <b>Name of Debtor:</b><br><u>NONE</u>                       |  |
| Name of Debtor:<br><u>NONE</u>                                                                                                      | Case Number:  | Date Filed:                                                 |  |
| District:                                                                                                                           | Relationship: | Judge:                                                      |  |

| Signatures                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Signature(s) of Debtor(s) (Individual/Joint)</b><br>I declare under penalty of perjury that the information provided in this petition is true and correct.<br>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.<br>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.<br><u>X</u> <u>Brenda J. Johnson-McGee</u><br>Signature of Debtor<br><u>X</u> _____<br>Signature of Joint Debtor<br>Telephone Number (If not represented by attorney)<br><u>5/24/2004</u><br>Date | <b>Exhibit A</b><br>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)<br><input type="checkbox"/> Exhibit A is attached and made a part of this petition<br><br><b>Exhibit B</b><br>(To be completed if debtor is an individual whose debts are primarily consumer debts)<br>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.<br><u>X</u> <u>B. Lehman</u> <u>5/24/2004</u><br>Signature of Attorney for Debtor(s) Date<br><br><b>Exhibit C</b><br>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?<br><input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition.<br><input checked="" type="checkbox"/> No<br><br><b>Signature of Non-Attorney Petition Preparer</b><br>I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.<br>Printed Name of Bankruptcy Petition Preparer _____<br>Social Security Number _____<br>Address _____<br>_____<br>_____<br>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:<br><br>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.<br><br><u>X</u> _____<br>Signature of Bankruptcy Petition Preparer<br>Date _____<br>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156. |

|                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Signature of Attorney</b><br><u>X</u> <u>B. Lehman</u><br>Signature of Attorney for Debtor(s)<br><u>Beth A. Lehman 1610465</u><br>Printed Name of Attorney for Debtor(s)<br><u>Lehman and Fox</u><br>Firm Name<br><u>6 East Monroe</u><br>Address<br><u>Suite 1004</u><br><u>Chicago IL 60603</u><br><u>312.332.4499</u> <u>5/24/2004</u><br>Telephone Number Date | <b>Signature of Debtor (Corporation/Partnership)</b><br>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.<br>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.<br><br><u>X</u> _____<br>Signature of Authorized Individual<br>Printed Name of Authorized Individual _____<br>Title of Authorized Individual _____<br><u>5/24/2004</u><br>Date |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re Brenda J. Johnson-McGee

Case No.  
Chapter 13

\_\_\_\_\_/ Debtor  
Attorney for Debtor: Beth A. Lehman

**STATEMENT PURSUANT TO RULE 2016(B)**

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
  - a) For legal services rendered or to be rendered in contemplation of and in connection with this case . . . . . \$ 2,700.00
  - b) Prior to the filing of this statement, debtor(s) have paid . . . . . \$ 500.00
  - c) The unpaid balance due and payable is . . . . . \$ 2,200.00
3. \$ 194.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
  - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
  - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
  - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and  
None other
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and  
None other
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:  
None
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:  
None

Dated: 5/24/2004

Respectfully submitted,

x Beth A. Lehman  
\_\_\_\_\_  
Attorney for Debtor: Beth A. Lehman  
Lehman and Fox  
6 East Monroe  
Suite 1004  
Chicago IL 60603

In re Brenda J. Johnson-McGee / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C-Property Claimed as Exempt.

| Description and Location of Property               | Nature of Debtor's Interest in Property           | Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|----------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------|
|                                                    |                                                   |                                                                                                         |                         |
| residence 535 Bellwood, Bellwood IL<br>1993 80,000 | Husband--H<br>Wife--W<br>Joint--J<br>Community--C | \$ 125,000.00                                                                                           | \$ 125,000.00           |

No continuation sheets attached

**TOTAL \$** 125,000.00  
(Report also on Summary of Schedules.)

In re Brenda J. Johnson-McGee

/ Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C-Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

| Type of Property                                                                                                                                                                                                             | None | Description and Location of Property                                   | Husband--H<br>Wife--W<br>Joint--J<br>Community--C | Current Market Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                              |      |                                                                        |                                                   |                                                                                                         |
| 1. Cash on hand.                                                                                                                                                                                                             | X    |                                                                        |                                                   |                                                                                                         |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |      | <i>checking acct Harris</i><br><i>Location: In debtor's possession</i> |                                                   | \$ 100.00                                                                                               |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.                                                                                                                                      | X    |                                                                        |                                                   |                                                                                                         |
| 4. Household goods and furnishings, including audio, video, and computer equipment.                                                                                                                                          |      | <i>furniture</i><br><i>Location: In debtor's possession</i>            |                                                   | \$ 700.00                                                                                               |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.                                                                                          | X    |                                                                        |                                                   |                                                                                                         |
| 6. Wearing apparel.                                                                                                                                                                                                          |      | <i>clothing</i><br><i>Location: In debtor's possession</i>             |                                                   | \$ 300.00                                                                                               |
| 7. Furs and jewelry.                                                                                                                                                                                                         |      | <i>necklace</i><br><i>Location: In debtor's possession</i>             |                                                   | \$ 200.00                                                                                               |
| 8. Firearms and sports, photographic, and other hobby equipment.                                                                                                                                                             | X    |                                                                        |                                                   |                                                                                                         |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.                                                                                                     | X    |                                                                        |                                                   |                                                                                                         |
| 10. Annuities. Itemize and name each issuer.                                                                                                                                                                                 | X    |                                                                        |                                                   |                                                                                                         |
| 11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.                                                                                                                                       | X    |                                                                        |                                                   |                                                                                                         |
| 12. Stock and interests in incorporated and unincorporated businesses. Itemize.                                                                                                                                              | X    |                                                                        |                                                   |                                                                                                         |
| 13. Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                    | X    |                                                                        |                                                   |                                                                                                         |

In re Brenda J. Johnson-McGee

/ Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property                                                                                                                                                             | N<br>o<br>n<br>e | Description and Location of Property     | Husband--H<br>Wife--W<br>Joint--J<br>Community--C | Current Market<br>Value<br>of Debtor's Interest,<br>in Property Without<br>Deducting any<br>Secured Claim or<br>Exemption |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                              |                  |                                          |                                                   |                                                                                                                           |
| 14. Government and corporate bonds and other negotiable and non-negotiable instruments.                                                                                      | X                |                                          |                                                   |                                                                                                                           |
| 15. Accounts Receivable.                                                                                                                                                     | X                |                                          |                                                   |                                                                                                                           |
| 16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.                                                     | X                |                                          |                                                   |                                                                                                                           |
| 17. Other liquidated debts owing debtor including tax refunds. Give particulars.                                                                                             | X                |                                          |                                                   |                                                                                                                           |
| 18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.        | X                |                                          |                                                   |                                                                                                                           |
| 19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.                                                    | X                |                                          |                                                   |                                                                                                                           |
| 20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X                |                                          |                                                   |                                                                                                                           |
| 21. Patents, copyrights, and other intellectual property. Give particulars.                                                                                                  | X                |                                          |                                                   |                                                                                                                           |
| 22. Licenses, franchises, and other general intangibles. Give particulars.                                                                                                   | X                |                                          |                                                   |                                                                                                                           |
| 23. Automobiles, trucks, trailers and other vehicles.                                                                                                                        | X                |                                          |                                                   |                                                                                                                           |
| 24. Boats, motors, and accessories.                                                                                                                                          | X                |                                          |                                                   |                                                                                                                           |
| 25. Aircraft and accessories.                                                                                                                                                | X                |                                          |                                                   |                                                                                                                           |
| 26. Office equipment, furnishings, and supplies.                                                                                                                             | X                |                                          |                                                   |                                                                                                                           |
| 27. Machinery, fixtures equipment and supplies used in business.                                                                                                             | X                | toys<br>Location: In debtor's possession |                                                   | \$ 500.00                                                                                                                 |
| 28. Inventory.                                                                                                                                                               | X                |                                          |                                                   |                                                                                                                           |
| 29. Animals.                                                                                                                                                                 | X                |                                          |                                                   |                                                                                                                           |
| 30. Crops - growing or harvested. Give particulars.                                                                                                                          | X                |                                          |                                                   |                                                                                                                           |
| 31. Farming equipment and implements.                                                                                                                                        | X                |                                          |                                                   |                                                                                                                           |

In re Brenda J. Johnson-McGee

/ Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property                                                        | N<br>o<br>n<br>e | Description and Location of Property | Husband--H<br>Wife--W<br>Joint--J<br>Community--C | Current Market<br>Value<br>of Debtor's Interest,<br>in Property Without<br>Deducting any<br>Secured Claim or<br>Exemption |
|-------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| 32. Farm supplies, chemicals, and feed.                                 | X                |                                      |                                                   |                                                                                                                           |
| 33. Other personal property of any kind not<br>already listed. Itemize. | X                |                                      |                                                   |                                                                                                                           |
|                                                                         |                  |                                      |                                                   |                                                                                                                           |

In re

Brenda J. Johnson-McGee

/ Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b) (1): Exemptions provided in 11 U.S.C. § 522(d). Note: These exemptions are available only in certain states.

☒ 11 U.S.C. § 522(b) (2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

| Description of Property | Specify Law Providing each Exemption | Value of Claimed Exemption | Current Market Value of Property Without Deducting Exemptions |
|-------------------------|--------------------------------------|----------------------------|---------------------------------------------------------------|
| furniture               | 735 ILCS 5/12-1001(b)                | \$ 700.00                  | \$ 700.00                                                     |
| clothing                | 735 ILCS 5/12-1001(a)                | \$ 300.00                  | \$ 300.00                                                     |
| necklace                | 735 ILCS 5/12-1001(b)                | \$ 200.00                  | \$ 200.00                                                     |
| toys                    | 735 ILCS 5/12-1001(b)                | \$ 500.00                  | \$ 500.00                                                     |
| residence               | " " 901                              | 7500                       | 125,000                                                       |



FORM B6D (12/03) West Group, Rochester, NY

In re Brenda J. Johnson-McGee / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Creditor's Name and Mailing Address<br>Including Zip Code                                                          | C<br>o<br>d<br>e<br>b<br>t<br>o<br>r | Date Claim was Incurred,<br>Nature of Lien, and Description and<br>Market Value of Property Subject to Lien | C<br>o<br>n<br>t<br>i<br>n<br>g<br>e<br>n<br>t | U<br>n<br>l<br>i<br>q<br>u<br>i<br>d<br>a<br>t<br>e<br>d | D<br>i<br>s<br>p<br>u<br>t<br>e<br>d | Amount of Claim<br>Without<br>Deducting Value<br>of Collateral | Unsecured<br>Portion, if any |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|----------------------------------------------------------------|------------------------------|
|                                                                                                                    |                                      |                                                                                                             |                                                |                                                          |                                      |                                                                |                              |
| Account No: 0619<br>Creditor # : 1<br>Imperial<br>PO Box 369<br>Concord CA 94522                                   |                                      | 1996<br>Second Mortgage in plan<br><br>Value: \$ 125,000.00                                                 |                                                |                                                          |                                      | \$ 5,005.00                                                    | \$ 5,005.00                  |
| Account No:<br>Creditor # : 2<br>Wells Fargo<br>c/o Pierce & Assoc<br>1 N. Dearborn #1300<br>Chicago IL 60602      |                                      | first mortgage arrearage<br><br>Value: \$ 125,000.00                                                        |                                                |                                                          |                                      | \$ 17,500.00                                                   | \$ 2,500.00                  |
| Account No: 62-S<br>Creditor # : 3<br>Wells Fargo<br>c/o Pierce & Assoc<br>1 N. Dearborn #1300<br>Chicago IL 60602 |                                      | 1993<br>first mortgage outside plan<br><br>Value: \$ 125,000.00                                             |                                                |                                                          |                                      | \$ 110,000.00                                                  | \$ 0.00                      |
| Account No:<br><br><br><br><br><br>Value:                                                                          |                                      |                                                                                                             |                                                |                                                          |                                      |                                                                |                              |

No continuation sheets attached

Subtotal \$ 132,505.00  
(Total of this page)  
Total \$ 132,505.00

(Use only on last page. Report total also on Summary of Schedules)

In re Brenda J. Johnson-McGee / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

TYPE OF PRIORITY *Taxes and Certain Other Debts Owed to Governmental Units*

| Creditor's Name and Mailing Address<br>including Zip Code                                                                     | C<br>o<br>d<br>e<br>b<br>t<br>o<br>r              | Date Claim was Incurred,<br>and consideration for Claim | C<br>o<br>n<br>t<br>i<br>n<br>g<br>e<br>n<br>t | U<br>n<br>l<br>i<br>q<br>u<br>i<br>t<br>a<br>t<br>e<br>d | D<br>i<br>s<br>p<br>u<br>t<br>e<br>d | Total Amount<br>of Claim | Amount Entitled<br>to Priority |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|--------------------------|--------------------------------|
|                                                                                                                               |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No: <u>2115</u><br>Creditor # : <u>1</u><br>Illinois Department Of Revenue<br>POB 88298<br>Chicago ILinois 60680-1298 | H--Husband<br>W--Wife<br>J--Joint<br>C--Community | 02-03<br>State income tax                               |                                                |                                                          |                                      | \$ 1,000.00              | \$ 1,000.00                    |
| Account No: <u>2115</u><br>Creditor # : <u>2</u><br>IRS<br>IRS Mail stop 5010 CHI/<br>230 S. Dearborn<br>Chicago IL 60604     |                                                   | 02-03<br>Income tax, federal                            |                                                |                                                          |                                      | \$ 4,000.00              | \$ 4,000.00                    |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |
| Account No:                                                                                                                   |                                                   |                                                         |                                                |                                                          |                                      |                          |                                |

Sheet No. 1 of 1 continuation sheets attached to

Schedule of Creditors

|                      |                 |
|----------------------|-----------------|
| <b>Subtotal \$</b>   | <b>5,000.00</b> |
| (Total of this page) |                 |
| <b>Total \$</b>      | <b>5,000.00</b> |

(Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)

Case No. \_\_\_\_\_  
(if known)

| Creditor's Name and Mailing Address<br>including Zip Code                                                                                                                                             | C<br>o<br>d<br>e<br>b<br>t<br>o<br>r | Date Claim was Incurred,<br>and Consideration for Claim.<br>If Claim is Subject to Setoff, so State. | C<br>o<br>n<br>t<br>i<br>n<br>g<br>e<br>n<br>t | U<br>n<br>i<br>q<br>u<br>i<br>d<br>a<br>t<br>e<br>d | D<br>i<br>s<br>p<br>u<br>t<br>e<br>d | Amount of Claim |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------|--------------------------------------|-----------------|
| Account No:                                                                                                                                                                                           |                                      |                                                                                                      |                                                |                                                     |                                      | \$ 443.00       |
| Creditor # : 1<br>Allied Interstate<br>15 Hazel Wood Drive, Suite 102<br>Amherst NY 14228                                                                                                             |                                      | Other                                                                                                |                                                |                                                     |                                      |                 |
| Account No: 2043                                                                                                                                                                                      |                                      |                                                                                                      |                                                |                                                     |                                      | \$ 416.00       |
| Creditor # : 2<br>Arrow Financial<br>21031 Network Place<br>Chicago IL 60678-1374                                                                                                                     |                                      | Other                                                                                                |                                                |                                                     |                                      |                 |
| Account No: 8081                                                                                                                                                                                      |                                      |                                                                                                      |                                                |                                                     |                                      | \$ 483.00       |
| Creditor # : 3<br>AT&T<br>Po Box 8212<br>Aurora, IL 60572                                                                                                                                             |                                      | Utility Bills                                                                                        |                                                |                                                     |                                      |                 |
| Account No: 2020                                                                                                                                                                                      |                                      |                                                                                                      |                                                |                                                     |                                      | \$ 68.00        |
| Creditor # : 4<br>NICOR<br>500 SW 7th St<br>Renton Washington 98057                                                                                                                                   |                                      | Utility Bills                                                                                        |                                                |                                                     |                                      |                 |
| <div> <div>2 continuation sheets attached</div> <div> <div>Subtotal \$</div> <div>(Total of this page)</div> <div>Total \$</div> <div>(Report total also on Summary of Schedules)</div> </div> </div> |                                      |                                                                                                      |                                                |                                                     |                                      | 1,410.00        |

FORM B6F ('2/03) West Group, Rochester, NY

In re Brenda J. Johnson-McGee / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name and Mailing Address<br>including Zip Code                                                        | C<br>o<br>d<br>e<br>b<br>t<br>o<br>r | Date Claim was Incurred,<br>and Consideration for Claim.<br>If Claim is Subject to Setoff, so State. | C<br>o<br>n<br>t<br>i<br>n<br>g<br>e<br>n<br>t | U<br>n<br>l<br>i<br>q<br>u<br>i<br>d<br>a<br>t<br>e<br>d | D<br>i<br>s<br>p<br>u<br>t<br>e<br>d | Amount of Claim |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
| Account No: 2355<br>Creditor # : 5<br>Gottlieb memorial hospital<br>10 South LaSalle Ste 100<br>Chicago IL 60603 |                                      | Medical bill                                                                                         |                                                |                                                          |                                      | \$ 232.00       |
| Account No: 00-0<br>Creditor # : 6<br>Loyola University<br>322 S Green Suite510<br>Chicago IL 60607              |                                      | Student Loan                                                                                         |                                                |                                                          |                                      | \$ 238.00       |
| Account No:<br>Creditor # : 7<br>City of Chgo Dept of Water<br>121 N LaSalle rm 107<br>Chicago IL 60604          |                                      | Parking tickets                                                                                      |                                                |                                                          |                                      | \$ 300.00       |
| Account No: 6451<br>Creditor # : 8<br>Cook County Collector<br>POB 802445<br>Chgo IL 60680-4110                  |                                      | Medical bill                                                                                         |                                                |                                                          |                                      | \$ 464.00       |
| Account No: 4676<br>Creditor # : 9<br>Household Automotive<br>11452 El Camino<br>San Diego CA 92130              |                                      | Other                                                                                                |                                                |                                                          |                                      | \$ 13,931.00    |
| Account No: 4787<br>Creditor # : 10<br>M3 Financial Services Inc<br>PO Box 802089<br>Chicago IL 60680-0001       |                                      | Credit Card Purchases                                                                                |                                                |                                                          |                                      | \$ 194.00       |

Sheet No. 1 of 2 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

**Subtotal \$** 15,359.00

(Total of this page)

**Total \$**

(Report total also on Summary of Schedules)

FORM B6F (12/03) West Group, Rochester, NY

In re Brenda J. Johnson-McGee / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name and Mailing Address<br>including Zip Code                                                               | C<br>o<br>d<br>e<br>b<br>t<br>o<br>r | Date Claim was Incurred,<br>and Consideration for Claim.<br>If Claim is Subject to Setoff, so State.<br><br>H--Husband<br>W--Wife<br>J--Joint<br>C--Community | C<br>o<br>n<br>t<br>i<br>n<br>g<br>e<br>n<br>t | U<br>n<br>l<br>i<br>q<br>u<br>i<br>d<br>a<br>t<br>e<br>d | D<br>i<br>s<br>p<br>u<br>t<br>e<br>d | Amount of Claim |
|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
| Account No: 2284<br>Creditor # : 11<br>Mt Sinai Hospital<br>California Ave at 15th Street<br>Chicago IL 60608           |                                      | Medical bill                                                                                                                                                  |                                                |                                                          |                                      | \$ 126.00       |
| Account No: 7639<br>Creditor # : 12<br>Municipal Collection Service<br>PO Box 666<br>Gurnee IL 60031                    |                                      | Other                                                                                                                                                         |                                                |                                                          |                                      | \$ 250.00       |
| Account No: 09-6<br>Creditor # : 13<br>America Inc<br>Meza AZ 85211-3010                                                |                                      | Other                                                                                                                                                         |                                                |                                                          |                                      | \$ 80.00        |
| Account No: BFUG<br>Creditor # : 14<br>Santana Energy Services<br>120 East Ogden<br>Hillside IL 60521                   |                                      | Utility Bills                                                                                                                                                 |                                                |                                                          |                                      | \$ 909.00       |
| Account No: 3484<br>Creditor # : 15<br>Sinai Medical Group<br>135 South LaSalle<br>Chicago IL 60603                     |                                      | Medical bill                                                                                                                                                  |                                                |                                                          |                                      | \$ 80.00        |
| Account No: 5-00<br>Creditor # : 16<br>Village of Bellwood (water d)<br>3200 Washington Boulevard<br>Bellwood IL 606104 |                                      | Utility Bills                                                                                                                                                 |                                                |                                                          |                                      | \$ 925.00       |

Sheet No. 2 of 2 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

|                                             |                  |
|---------------------------------------------|------------------|
| <b>Subtotal \$</b>                          | <b>2,370.00</b>  |
| (Total of this page)                        |                  |
| <b>Total \$</b>                             | <b>19,139.00</b> |
| (Report total also on Summary of Schedules) |                  |

In re Brenda J. Johnson-McGee / Debtor Case No. \_\_\_\_\_  
(if known)

## SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☒ Check this box if the debtor has no executory contracts or unexpired leases.

| Name and Mailing Address,<br>including Zip Code, of<br>other Parties to Lease<br>or Contract | Description of Contract or Lease and<br>Nature of Debtor's Interest.<br>State whether Lease is for Nonresidential Real Property.<br>State Contract Number of any Government Contract. |
|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                              |                                                                                                                                                                                       |

In re Brenda J. Johnson-McGee / Debtor Case No. \_\_\_\_\_  
(if known)

## SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☒ Check this box if the debtor has no codebtors.

| Name and Address of Codebtor | Name and Address of Creditor |
|------------------------------|------------------------------|
|                              |                              |

In re Brenda J. Johnson-McGee

/ Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

| Debtor's Marital Status: | DEPENDENTS OF DEBTOR AND SPOUSE |     |
|--------------------------|---------------------------------|-----|
| <b>Single</b>            | RELATIONSHIP                    | AGE |
|                          | son                             | 17  |
|                          | son                             | 11  |
|                          | daughter                        | 4   |

| EMPLOYMENT:         | DEBTOR                                    | SPOUSE |
|---------------------|-------------------------------------------|--------|
| Occupation          | <b>day care provider</b>                  |        |
| Name of Employer    | <b>State of Illinois</b>                  |        |
| How Long Employed   | <b>7 yrs</b>                              |        |
| Address of Employer | <b>535 Bellwood<br/>Bellwood IL 60104</b> |        |

|                                                                                                                        | DEBTOR             | SPOUSE         |
|------------------------------------------------------------------------------------------------------------------------|--------------------|----------------|
| Income: (Estimate of average monthly income)                                                                           |                    |                |
| Current Monthly gross wages, salary, and commissions (pro rate if not paid monthly)                                    | \$ <b>4,408.00</b> | \$ <b>0.00</b> |
| Estimated Monthly Overtime                                                                                             | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| SUBTOTAL                                                                                                               | \$ <b>4,408.00</b> | \$ <b>0.00</b> |
| LESS PAYROLL DEDUCTIONS                                                                                                |                    |                |
| a. Payroll Taxes and Social Security                                                                                   | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| b. Insurance                                                                                                           | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| c. Union Dues                                                                                                          | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| d. Other (Specify):                                                                                                    | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| SUBTOTAL OF PAYROLL DEDUCTIONS                                                                                         | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| TOTAL NET MONTHLY TAKE HOME PAY                                                                                        | \$ <b>4,408.00</b> | \$ <b>0.00</b> |
| Regular income from operation of business or profession or farm (attach detailed statement)                            | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Income from Real Property                                                                                              | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Interest and dividends                                                                                                 | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Social Security or other government assistance                                                                         |                    |                |
| Specify:                                                                                                               | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Pension or retirement income                                                                                           | \$ <b>0.00</b>     | \$ <b>0.00</b> |
| Other monthly income                                                                                                   |                    |                |
| Specify: <b>rental Kimberly Johnson</b>                                                                                | \$ <b>650.00</b>   | \$ <b>0.00</b> |
| TOTAL MONTHLY INCOME                                                                                                   | \$ <b>5,058.00</b> | \$ <b>0.00</b> |
| TOTAL COMBINED MONTHLY INCOME                                                                                          | \$ <b>5,058.00</b> |                |
| (Report also on Summary of Schedules)                                                                                  |                    |                |

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:



In re Brenda J. Johnson-McGee / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR**

Complete this schedule by estimating the average expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

|                                                                                                     |    |                 |
|-----------------------------------------------------------------------------------------------------|----|-----------------|
| Rent or home mortgage payment (include lot rented for mobile home)                                  | \$ | 1,158.00        |
| Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |    |                 |
| Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |    |                 |
| Utilities: Electricity and heating fuel                                                             | \$ | 300.00          |
| Water and sewer                                                                                     | \$ | 50.00           |
| Telephone                                                                                           | \$ | 85.00           |
| Other <u>cell phone</u>                                                                             | \$ | 59.00           |
| Other                                                                                               | \$ | 0.00            |
| Other                                                                                               | \$ | 0.00            |
| Home maintenance (Repairs and upkeep)                                                               | \$ | 79.00           |
| Food                                                                                                | \$ | 400.00          |
| Clothing                                                                                            | \$ | 150.00          |
| Laundry and dry cleaning                                                                            | \$ | 60.00           |
| Medical and dental expenses                                                                         | \$ | 50.00           |
| Transportation (not including car payments)                                                         | \$ | 75.00           |
| Recreation, clubs and entertainment, newspapers, magazines, etc.                                    | \$ | 0.00            |
| Charitable contributions                                                                            | \$ | 100.00          |
| Insurance (not deducted from wages or included in home mortgage payments)                           |    |                 |
| Homeowner's or renter's                                                                             | \$ | 67.00           |
| Life                                                                                                | \$ | 0.00            |
| Health                                                                                              | \$ | 90.00           |
| Auto                                                                                                | \$ | 40.00           |
| Other                                                                                               | \$ | 0.00            |
| Other                                                                                               | \$ | 0.00            |
| Other                                                                                               | \$ | 0.00            |
| Taxes (not deducted from wages or included in home mortgage)                                        |    |                 |
| Specify: <u>re taxes</u>                                                                            | \$ | 212.00          |
| Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan) |    |                 |
| Auto                                                                                                | \$ | 0.00            |
| Other: <u>income tax escrow</u>                                                                     | \$ | 200.00          |
| Other:                                                                                              | \$ | 0.00            |
| Other: <u>personal grooming</u>                                                                     | \$ | 75.00           |
| Alimony, maintenance, and support paid to others                                                    | \$ | 0.00            |
| Payments for support of additional dependents not living at your home                               | \$ | 0.00            |
| Regular expenses from operation of business, profession, or farm (attach detailed statement)        | \$ | 0.00            |
| Other: <u>food for daycare</u>                                                                      | \$ | 1,000.00        |
| Other: <u>state license</u>                                                                         | \$ | 8.00            |
| Other: <u>school expenses, lunches</u>                                                              | \$ | 50.00           |
| <b>TOTAL MONTHLY EXPENSES</b> (Report also on Summary of Schedules)                                 | \$ | <b>4,308.00</b> |

**(FOR CHAPTER 12 AND 13 DEBTORS ONLY)**

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

|                                                           |    |          |
|-----------------------------------------------------------|----|----------|
| A. Total projected monthly income                         | \$ | 5,058.00 |
| B. Total projected monthly expenses                       | \$ | 4,308.00 |
| C. Excess income (A minus B)                              | \$ | 750.00   |
| D. Total amount to be paid into plan each: <u>Monthly</u> | \$ | 750.00   |

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**In re *Brenda J. Johnson-McGee*Case No.  
Chapter 13

\_\_\_\_\_/ Debtor

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages on each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E and F to determine the total amount of the debtor's liabilities.

|                                                     |                      |                  | AMOUNTS SCHEDULED |               |             |
|-----------------------------------------------------|----------------------|------------------|-------------------|---------------|-------------|
| NAME OF SCHEDULE                                    | Attached<br>(Yes/No) | No. of<br>Sheets | ASSETS            | LIABILITIES   | OTHER       |
| A-Real Property                                     | Yes                  | 1                | \$ 125,000.00     |               |             |
| B-Personal Property                                 | Yes                  | 3                | \$ 1,800.00       |               |             |
| C-Property Claimed as<br>Exempt                     | Yes                  | 1                |                   |               |             |
| D-Creditors Holding Secured<br>Claims               | Yes                  | 1                |                   | \$ 132,505.00 |             |
| E-Creditors Holding<br>Unsecured Priority Claims    | Yes                  | 2                |                   | \$ 5,000.00   |             |
| F-Creditors Holding<br>Unsecured Nonpriority Claims | Yes                  | 3                |                   | \$ 19,139.00  |             |
| G-Executory Contracts and<br>Unexpired Leases       | Yes                  | 1                |                   |               |             |
| H-Codebtors                                         | Yes                  | 1                |                   |               |             |
| I-Current Income of Individual<br>Debtor(s)         | Yes                  | 1                |                   |               | \$ 5,058.00 |
| J-Current Expenditures of<br>Individual Debtor(s)   | Yes                  | 1                |                   |               | \$ 4,308.00 |
| Total Number of Sheets in All Schedules ►           |                      | 15               |                   |               |             |
| Total Assets ►                                      |                      |                  | \$ 126,800.00     |               |             |
| Total Liabilities ►                                 |                      |                  |                   | \$ 156,644.00 |             |

In re Brenda J. Johnson-McGee / Debtor Case No. \_\_\_\_\_  
(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 14 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 5/24/2004

Signature

Brenda J. Johnson-McGee  
Brenda J. Johnson-McGee

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re *Brenda J. Johnson-McGee*

Case No.  
Chapter 13

\_\_\_\_\_/ Debtor

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to any question is "None," or the question is not applicable, mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

**1. Income from employment or operation of business.**

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE (if more than one)

Year to date: 17000

day care

Last Year: 40000

Year before:

**2. Income other than from employment or operation of business.**

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**3. Payments to creditors.**

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**4. Suits and administrative proceedings, executions, garnishments and attachments.**

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| <u>CAPTION OF SUIT<br/>AND CASE NUMBER</u> | <u>NATURE OF PROCEEDING</u> | <u>COURT OR AGENCY<br/>AND LOCATION</u> | <u>STATUS OR DISPOSITION</u> |
|--------------------------------------------|-----------------------------|-----------------------------------------|------------------------------|
| <i>Saxon v Johnson</i>                     | <i>foreclosure</i>          |                                         | <i>pending</i>               |

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**5. Repossessions, foreclosures and returns.**

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| <u>NAME AND ADDRESS<br/>OF CREDITOR OR SELLER</u> | <u>DATE OF<br/>REPOSSESSION<br/>FORECLOSURE SALE,<br/>TRANSFER OR RETURN</u> | <u>DESCRIPTION AND VALUE OF PROPERTY</u>         |
|---------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------|
| <i>Name: Household Finance</i><br><i>Address:</i> | <i>3/04</i>                                                                  | <i>Description: 97 Windstar</i><br><i>Value:</i> |

**6. Assignments and receiverships.**

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**7. Gifts.**

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**8. Losses.**

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**9. Payments related to debt counseling or bankruptcy.**

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE                                                             | DATE OF PAYMENT,<br>NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR<br>DESCRIPTION AND VALUE OF PROPERTY |
|---------------------------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------|
| Payee: Beth A. Lehman<br>Address:<br>6 East Monroe<br>Suite 1004<br>Chicago, IL 60603 | Date of Payment:<br>Payor: Brenda J. Johnson-<br>McGee | \$500.00                                                |

|                                  |                                  |        |
|----------------------------------|----------------------------------|--------|
| Payee: Legal Helpers<br>Address: | Date of Payment: 12/03<br>Payor: | 700.00 |
|----------------------------------|----------------------------------|--------|

**10. Other transfers.**

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**11. Closed financial accounts.**

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless spouses are separated and a joint petition is not filed.)

☒ NONE

**12. Safe deposit boxes.**

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**13. Setoffs.**

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**14. Property held for another person.**

List all property owned by another person that the debtor holds or controls.

☒ NONE

**15. Prior address of debtor.**

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

☒ NONE

**16. Spouses and Former Spouses**

If the debtor resides or resided in a community property state, commonwealth or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

☒ NONE

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, release of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under any Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

☒ NONE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

☒ NONE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

☒ NONE

**18. Nature, location and name of business**

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

☒ NONE

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.


☒ NONE

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of Perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information, and belief.

Date 5/24/2004

Signature

  
Brenda J. Johnson-McGee

Date \_\_\_\_\_

Signature \_\_\_\_\_

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both, 18 U.S.C. § 152 and § 3571.



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re *Brenda J. Johnson-McGee*

Case No.  
Chapter 13

\_\_\_\_\_/ Debtor  
Attorney for Debtor: *Beth A. Lehman*

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: 5/24/2004

  
Debtor

Allied Interstate  
15 Hazel Wood Drive, Suite 102  
Amherst, NY 14228

Arrow Financial  
Acct#: 2043  
21031 Network Place  
Chicago, IL 60678-1374

AT&T  
Acct#: 8081  
Po Box 8212  
Aurora,, IL 60572

NICOR  
Acct#: 2020  
500 SW 7th St  
Renton , Washington 98057

Gottlieb memorial hospital  
Acct#: 2355  
10 South LaSalle Ste 100  
Chicago, IL 60603

Loyola University  
Acct#: 00-0  
322 S Green Suite510  
Chicago, IL 60607

City of Chgo Dept of Water  
121 N LaSalle rm 107  
Chicago, IL 60604

Cook County Collector  
Acct#: 6451  
POB 802445  
Chgo, IL 60680-4110

Household Automotive  
Acct#: 4676  
11452 El Camino  
San Diego, CA 92130

Illinois Department Of Revenue  
Acct#: 2115  
POB 88298  
Chicago, ILinois 60680-1298

Imperial  
Acct#: 0619  
PO Box 369  
Concord, CA 94522

IRS  
Acct#: 2115  
IRS Mail stop 5010 CHI/  
230 S. Dearborn  
Chicago, IL 60604

M3 Financial Services, Inc  
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Acct#: 4787  
PO Box 802089  
Chicago, IL 60680-0001

Mt Sinai Hospital  
Acct#: 2284  
California Ave at 15th Street  
Chicago, IL 60608

Municipal Collection Service  
Acct#: 7639  
PO Box 666  
Gurnee, IL 60031

America Inc  
Acct#: 09-6  
Meza, AZ 85211-3010

Santana Energy Services  
Acct#: BFUG  
120 East Ogden  
Hillside, IL 60521

Sinai Medical Group  
Acct#: 3484  
135 South LaSalle  
Chicago, IL 60603

Village of Belllwood (water d)  
Acct#: 5-00  
3200 Washington Boulevard  
Bellwood, IL 606104

Wells Fargo  
c/o Pierce & Assoc  
1 N. Dearborn #1300  
Chicago, IL 60602

Wells Fargo  
Acct#: 62-S  
c/c Pierce & Assoc  
1 N. Dearborn #1300  
Chicago, IL 60602